

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Western District of Texas

Case number (if known): _____ Chapter _____

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Hayagriva Enterprises, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as names*

3. Debtor's federal Employer Identification Number (EIN)

8 5 - 1 1 3 5 2 7 3

4. Debtor's address

Principal place of business

1740 Universal City Blvd Ste. 132-136
Number Street

Mailing address, if different from principal place of business

416 Wagon Wheel Way
Number Street

Universal City, TX 78148
City State ZIP Code

P.O. Box

Cibolo, TX 78108
City State ZIP Code

Bexar
County

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: _____

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

7. Describe debtor's business**A. Check one:**

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. §101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. §781(3))
 None of the above

B. Check all that apply:

Tax-exempt entity (as described in 26 U.S.C. §501)
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
 Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

A debtor who is a "small business debtor" must check the first subbox. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box

Check one:

Chapter 7

Chapter 9

□ Chapter 11. Check all that apply:

The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

If more than 2 cases, attach a separate list.

No

Yes. District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

List all cases. If more than 1, attach a separate list.

No

Yes. Debtor _____ Relationship _____

District _____ When _____
 MM / DD / YYYY
 Case number, if known _____

Debtor	<u>Hayagriva Enterprises, LLC</u>		Case number (if known) _____												
Name _____															
<p>11. Why is the case filed in this district? <i>Check all that apply:</i></p> <p><input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.</p> <p><input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.</p>															
<p>12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.</p> <p>Why does the property need immediate attention? (Check all that apply.)</p> <p><input type="checkbox"/> It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____</p> <p><input type="checkbox"/> It needs to be physically secured or protected from the weather.</p> <p><input type="checkbox"/> It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).</p> <p><input type="checkbox"/> Other _____</p> <p>Where is the property? _____</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Number</td> <td style="width: 50%;">Street</td> <td style="width: 25%;"></td> </tr> <tr> <td colspan="2">_____</td> <td></td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> <tr> <td colspan="2">_____</td> <td>_____</td> </tr> </table> <p>Is the property insured?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Insurance agency _____ Contact name _____ Phone _____</p>				Number	Street		_____			City	State	ZIP Code	_____		_____
Number	Street														

City	State	ZIP Code													
_____		_____													
Statistical and administrative information															
<p>13. Debtor's estimation of available funds? <i>Check one:</i></p> <p><input type="checkbox"/> Funds will be available for distribution to unsecured creditors.</p> <p><input checked="" type="checkbox"/> After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.</p>															
<p>14. Estimated number of creditors</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><input checked="" type="checkbox"/> 1-49</td> <td style="width: 33%; text-align: center;"><input type="checkbox"/> 50-99</td> <td style="width: 33%; text-align: center;"><input type="checkbox"/> 1,000-5,000</td> <td style="text-align: center;"><input type="checkbox"/> 5,001-10,000</td> <td style="text-align: center;"><input type="checkbox"/> 25,001-50,000</td> <td style="text-align: center;"><input type="checkbox"/> 50,000-100,000</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> 100-199</td> <td style="text-align: center;"><input checked="" type="checkbox"/> 200-999</td> <td style="text-align: center;"><input type="checkbox"/> 10,001-25,000</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> More than 100,000</td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,000-100,000	<input type="checkbox"/> 100-199	<input checked="" type="checkbox"/> 200-999	<input type="checkbox"/> 10,001-25,000		<input type="checkbox"/> More than 100,000	
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<input type="checkbox"/> 100-199	<input checked="" type="checkbox"/> 200-999	<input type="checkbox"/> 10,001-25,000		<input type="checkbox"/> More than 100,000											
<p>15. Estimated assets</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><input type="checkbox"/> \$0-\$50,000</td> <td style="width: 33%; text-align: center;"><input type="checkbox"/> \$1,000,001-\$10 million</td> <td style="width: 33%; text-align: center;"><input type="checkbox"/> \$500,000,001-\$1 billion</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> \$50,001-\$100,000</td> <td style="text-align: center;"><input type="checkbox"/> \$10,000,001-\$50 million</td> <td style="text-align: center;"><input type="checkbox"/> \$1,000,000,001-\$10 billion</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> \$100,001-\$500,000</td> <td style="text-align: center;"><input type="checkbox"/> \$50,000,001-\$100 million</td> <td style="text-align: center;"><input type="checkbox"/> \$10,000,000,001-\$50 billion</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> \$500,001-\$1 million</td> <td style="text-align: center;"><input type="checkbox"/> \$100,000,001-\$500 million</td> <td style="text-align: center;"><input type="checkbox"/> More than \$50 billion</td> </tr> </table>				<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion	<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion
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<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion													

Debtor Hayagriva Enterprises, LLC _____ Case number (*if known*) _____
 Name _____

16. Estimated liabilities

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/01/2021
 MM/ DD/ YYYY

/s/ Vikas Nath

Signature of authorized representative of debtor

Vikas Nath

Printed name

Title

member

18. Signature of attorney

/s/ Heidi McLeod

Signature of attorney for debtor

Date 06/01/2021

MM/ DD/ YYYY

Heidi McLeod
 Printed name

Heidi McLeod Law Office, PLLC
 Firm name

3355 Cherry Ridge 214
 Number Street

San Antonio
 City

TX State 78230 ZIP Code

Contact phone

heidimcleodlaw@gmail.com
 Email address

13764700
 Bar number

TX State

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.

Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest
--	------------------------------------

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
--	-----------------	---------------------------------

3.1 <u>Chase</u>	<u>Checking account</u>	<u>\$40.48</u>
3.2 <u>Chase</u>	<u>Savings account</u>	<u>\$9.48</u>

4. Other cash equivalents (*Identify all*)

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$49.96

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.

Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 <u>Universal City Business Park LLC</u>	<u>\$5,153.00</u>
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Debtor Hayagriva Enterprises, LLC
Name

Case number (if known) _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

None**9. Total of Part 2**

Add lines 7 through 8 (including amounts on any additional sheets). Copy the total to line 81.

\$5,153.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts Receivable**

11a. 90 days old or less:	<u>\$1,612.00</u>	-	<u>\$1,612.00</u>	= →	<u>\$0.00</u>
face amount		doubtful or uncollectible accounts			

11b. Over 90 days old:	<u> </u>	-	<u> </u>	= →	<u> </u>
face amount		doubtful or uncollectible accounts			

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$0.00**Part 4: Investments****13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

None**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of fund or stock: % of ownership:

None**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

None

17. Total of Part 4

Add lines 14 through 16 (including any additional sheets). Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

19. Raw materials

19.1 <u>stair lifts and portable ramps</u>	MM / DD / YYYY	(Unknown)	wholesale	\$42,371.00
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20. Work in progress

None

21. Finished goods, including goods held for resale

None

22. Other inventory or supplies

None

23. Total of Part 5

Add lines 19 through 22 (including any additional sheets). Copy the total to line 84.

\$42,371.00

24. Is any of the property listed in Part 5 perishable? No Yes**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?** No Yes**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?** No Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?** No. Go to Part 7. Yes. Fill in the information below.

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

28. Crops — either planted or harvested

None

29. Farm animals Examples: Livestock, poultry, farm-raised fish

None

30. Farm machinery and equipment (Other than titled motor vehicles)

None

31. Farm and fishing supplies, chemicals, and feed

None

32. Other farming and fishing-related property not already listed in Part 6

None

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

\$0.00**34. Is the debtor a member of an agricultural cooperative?** No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

3 computers, 3 desks, 8 chairs, 1 break room cabinet, 1 water cooler, Hands-free Headset, 2 Speakerphones, phone handset, vacuum cleaner, Folded towel dispenser, Toilet tissue dispenser, 2 Trash receptacle, Hand sanitizer dispenser, wet floor sign, 3 Office trash can, 3 Surge protector, 3 Cord protector, Rolling ladder, Pallet rack, 4 Pallet rack wire decking, Pallet truck, Mop wringer, Mop bucket, Mop handle, EZ access single fold ramp, 2 EZ access trifold ramp and Industrial appliance hand truck, Magazine stand, accent table, diagnostics kit, pinnacle rail

39.1 drill jig, _____(Unknown)purchase price\$10,471.46**40. Office fixtures****None****41. Office equipment, including all computer equipment and communication systems equipment and software**41.1 tools _____(Unknown)\$2,173.49**42. Collectibles Examples:** Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles**None****43. Total of Part 7**

Add lines 39 through 42. Copy the total to line 86.

\$12,644.95**44. Is a depreciation schedule available for any of the property listed in Part 7?**

No
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No
 Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)			

Debtor Hayagriva Enterprises, LLC
Name _____ Case number (*if known*) _____

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 2020 Ford Transit Van _____ (Unknown) _____ \$40,000.00

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

None

49. Aircraft and accessories

None

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

None

51. Total of Part 8

Add lines 47 through 50. Copy the total to line 87.

\$40,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Part 9: Real Property**54. Does the debtor own or lease any real property?**

No. Go to Part 10.
 Yes. Fill in the information below.

General description	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available				

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest

None

56. Total of Part 9

Add the current value on lines 55.1 through 55.3 and entries from any addition sheets. Copy the total to line 88.

\$0.00

Debtor Hayagriva Enterprises, LLC
 Name _____ Case number (*if known*) _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

60. Patents, copyrights, trademarks, and trade secrets

None

61. Internet domain names and websites

None

62. Licenses, franchises, and royalties

None

63. Customer lists, mailing lists, or other compilations

None

64. Other intangibles, or intellectual property

None

65. Goodwill

None

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers? (as defined in 11 U.S.C. §§ 101(41A) and 107)

No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No
 Yes

Debtor Hayagriva Enterprises, LLC
Name _____

Case number (*if known*) _____

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

No. Go to Part 12.
 Yes. Fill in the information below.

Current value of debtor's interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)

None

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed Examples: Season tickets, country club membership

None

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

Part 12: Summary

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$49.96	
81. Deposits and prepayments. Copy line 9, Part 2.	\$5,153.00	
82. Accounts receivable. Copy line 12, Part 3.	\$0.00	
83. Investments. Copy line 17, Part 4.	\$0.00	
84. Inventory. Copy line 23, Part 5.	\$42,371.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86. Office furniture, fixtures, and equipment; collectibles. Copy line 43, Part 7.	\$12,644.95	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$40,000.00	
88. Real property. Copy line 56, Part 9.....		\$0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+ \$0.00	
91. Total. Add lines 80 through 90 for each column.....	91a. \$100,218.91	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92		\$100,218.91

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Creditor's name	Describe debtor's property that is subject to a lien	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1 Ford Credit	2020 Ford Transit Van	<u>\$37,225.95</u>	<u>\$40,000.00</u>
Creditor's mailing address	Describe the lien		
National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962-2180			
Creditor's email address, if known	Is the creditor an insider or related party?		
Date debt was incurred	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes.		
9 3 5 4			
Do multiple creditors have an interest in the same property?	Is anyone else liable on this claim?		
<input checked="" type="checkbox"/> No.	<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.	<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
As of the petition filing date, the claim is:			
Check all that apply.			
<input type="checkbox"/> Contingent			
<input type="checkbox"/> Unliquidated			
<input type="checkbox"/> Disputed			
3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.		<u>\$37,225.95</u>	

Debtor Hayagriva Enterprises, LLC _____ Case number (*if known*) _____
 Name _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
_____	Line _____	_____
_____	_____	_____
_____	_____	_____

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number ____-____-	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ____		
2.2 Priority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred _____	Basis for the claim: _____	
Last 4 digits of account number ____-____-	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ____		

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 101 Mobility Franchise Systems, LLC 5221 Oleander Dr Wilmington, NC 28403-7071	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<u>unknown</u>
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.2	Nonpriority creditor's name and mailing address Bruno Independent Living Aids PO Box 68-5086 Chicago, IL 60695	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<u>\$15,772.50</u>
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>8 0 9 6</u>	
3.3	Nonpriority creditor's name and mailing address Cardmember Services PO Box 6294 Carol Stream, IL 60197	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<u>\$47,926.51</u>
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>6 1 3 8</u>	
3.4	Nonpriority creditor's name and mailing address Handicare 10888 Metro Court Maryland Heights, MO 63043	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<u>\$6,465.00</u>
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>0 0 2 4</u>	
3.5	Nonpriority creditor's name and mailing address Harmar PO Box 744560 Atlanta, GA 30374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		<u>\$13,500.00</u>
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number <u>9 3 0 3</u>	

Debtor

Hayagriva Enterprises, LLC

Name

Case number (*if known*) _____

Part 2: Additional Page

3.6 Nonpriority creditor's name and mailing address

Harmar

PO Box 744560

Atlanta, GA 30374

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$865.00

Basis for the claim: Unsecured

Is the claim subject to offset?

No
 Yes

3.7 Nonpriority creditor's name and mailing address

Harmar

PO Box 744560

Atlanta, GA 30374

As of the petition filing date, the claim is:

\$5,165.00

Check all that apply.

Contingent
 Unliquidated
 Disputed

Basis for the claim: Unsecured

Is the claim subject to offset?

No
 Yes

3.8 Nonpriority creditor's name and mailing address

Universal City Business Park LLC

41 Westelm Cir

San Antonio, TX 78230-2641

As of the petition filing date, the claim is:

unknown

Check all that apply.

Contingent
 Unliquidated
 Disputed

Basis for the claim: _____

Is the claim subject to offset?

No
 Yes

Date or dates debt was incurred

Last 4 digits of account number

9 3 0 3

Date or dates debt was incurred

Last 4 digits of account number

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.**

			Total of claim amounts
5a. Total claims from Part 1	5a.		\$0.00
5b. Total claims from Part 2	5b.	+	\$89,694.01
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		\$89,694.01

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____ Chapter 7

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

<p>2.1</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>commercial lease</p> <p>Contract to be REJECTED</p> <p>State the term remaining</p> <p>51 months</p> <p>List the contract number of any government contract</p>	<p>Universal City Business Park LLC</p> <p>41 Westelm Cir</p> <p>San Antonio, TX 78230-2641</p>
<p>2.2</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>franchise agreement</p> <p>Contract to be REJECTED</p> <p>State the term remaining</p> <p>0 months</p> <p>List the contract number of any government contract</p>	<p>101 Mobility Franchise Systems, LLC</p> <p>5221 Oleander Dr</p> <p>Wilmington, NC 28403-7071</p>
<p>2.3</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	
<p>2.4</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	
<p>2.5</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing Address	Name	Check all schedules that apply:
2.1 <u>Nath, Vikas</u>	<u>416 Wagon Wheel Way</u> Street <u>Cibolo, TX 78108</u> City State ZIP Code	<u>101 Mobility Franchise Systems,</u> LLC	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.2	Street City State ZIP Code		
2.3	Street City State ZIP Code		
2.4	Street City State ZIP Code		
2.5	Street City State ZIP Code		

Debtor Hayagriva Enterprises, LLC _____ Case number (*if known*) _____
Name _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Name	Mailing Address
2.6 _____	Street _____
City _____	State _____ ZIP Code _____

Column 2: Creditor**Name***Check all schedules
that apply:*

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____ Chapter 7

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)

1a. Real Property:

Copy line 88 from Schedule A/B.....

_____ \$0.00

1b. Total personal property:

Copy line 91A from Schedule A/B.....

_____ \$100,218.91

1c. Total of all property:

Copy line 92 from Schedule A/B.....

_____ \$100,218.91

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D.....

_____ \$37,225.95

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

_____ \$0.00

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ _____ \$89,694.01

4. Total liabilities.....

Lines 2 + 3a + 3b

_____ \$126,919.96

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year		Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2021</u> MM/ DD/ YYYY to Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$19,534.00
For prior year:	From <u>01/01/2020</u> MM/ DD/ YYYY to <u>12/31/2020</u> MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$0.00
For the year before that:	From <u>01/01/2019</u> MM/ DD/ YYYY to <u>12/31/2019</u> MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$0.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)

From the beginning of the fiscal year to filing date:	From <u>01/01/2021</u> MM/ DD/ YYYY to Filing date
For prior year:	From <u>01/01/2020</u> MM/ DD/ YYYY to <u>12/31/2020</u> MM/ DD/ YYYY
For the year before that:	From <u>01/01/2019</u> MM/ DD/ YYYY to <u>12/31/2019</u> MM/ DD/ YYYY

Debtor Hayagriva Enterprises, LLC
Name

Case number (*if known*) _____

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
1. _____ Creditor's name _____ Street _____ _____ City _____ State _____ ZIP Code _____			<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
1. <u>101 Mobility Franchise Systems, LLC</u> Creditor's name <u>5221 Oleander Dr</u> Street <u>Wilmington, NC 28403-7071</u> City State ZIP Code	<u>04/01/2021</u> <u>05/01/2021</u> <u> </u>	<u>\$2,439.00</u>	<u>franchise fees</u> <u> </u>
Relationship to debtor <u>franchise signed by Vikas Nath</u>	<u> </u>		
2. <u>101 Mobility Franchise Systems, LLC</u> Creditor's name <u>5221 Oleander Dr</u> Street <u>Wilmington, NC 28403-7071</u> City State ZIP Code	<u>04/01/2021</u> <u>05/01/2021</u> <u> </u>	<u>\$11,783.00</u>	<u>franchise fees</u> <u> </u>
Relationship to debtor <u>operate franchise</u>	<u> </u>		

Debtor	Hayagriva Enterprises, LLC Name			Case number (if known)
4.3.	JP Morgan Chase Creditor's name P O Box 901033 Street Fort Worth, TX 76101	04/01/2021 05/01/2021	\$947.00	pay business expense incurred on the card
	City State ZIP Code			
	Relationship to debtor			
	single member cosigned card			
5. Repossessions, foreclosures, and returns	List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.			
<input checked="" type="checkbox"/> None				
Creditor's name and address	Description of the property	Date	Value of property	
5.1. Creditor's name Street City State ZIP Code				
6. Setoffs	List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.			
<input checked="" type="checkbox"/> None				
Creditor's name and address	Description of the action creditor took	Date action was taken	Amount	
5.1. Creditor's name Street City State ZIP Code	XXXX- _____			
Part 3: Legal Actions or Assignments				
7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits	List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity —within 1 year before filing this case.			
<input checked="" type="checkbox"/> None				
7.1. Case title	Nature of case	Court or agency's name and address	Status of case	
		Name	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded	
Case number		Street		
		City State ZIP Code		

Debtor Hayagriva Enterprises, LLC _____ Case number (if known) _____
 Name _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

8.1. Custodian's name and address	Description of the property	Value
Custodian's name	Case title	Court name and address
Street		Name
City	Case number	Street
State		
ZIP Code	Date of order or assignment	City State ZIP Code

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

None

9.1. Recipient's name and address	Description of the gifts or contributions	Dates given	Value
Recipient's name			
Street			
City			
State			
ZIP Code			
Recipient's relationship to debtor			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.	List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

10.1. _____

Part 6: Certain Payments or Transfers

Debtor Hayagriva Enterprises, LLC
Name

Case number (if known) _____

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

11.1. Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
<u>Heidi McLeod Law Office, PLLC</u>	<u>Attorney's Fee</u>	<u>6/1/2021</u>	<u>\$4,000.00</u>
Address			
<u>3355 Cherry Ridge 214</u> Street			
<u>San Antonio, TX 78230</u> City State ZIP Code			
Email or website address			
Who made the payment, if not debtor?			
<u>Vikas Nath</u>			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

12.1. Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Debtor	Hayagriva Enterprises, LLC Name			Case number (if known)
13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	101 Mobility		04/01/2021	\$10,000.00
	Address			
	Street			
	City	State	ZIP Code	
	Relationship to debtor			
13.2.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	Northside Ford	down payment on 2020 transport van	10/05/2020	\$1,750.00
	Address			
	12300 San Pedro Ave Street			
	San Antonio, TX 78216-2841 City	State	ZIP Code	
	Relationship to debtor			
13.3.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	Northside Ford	Work done on the 2020 Transit Van		\$8,159.25
	Address			
	Street			
	City	State	ZIP Code	
	Relationship to debtor			

Debtor	Hayagriva Enterprises, LLC Name			Case number (if known)
13.4.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	Cobalt Truck Equipment		11/12/2020	\$9,385.28
	Address			
	11218 I-10 East Street			
	Converse, TX 78109 City State ZIP Code			
	Relationship to debtor			
13.5.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	Dealer Source		10/19/2020	\$7,401.00
	Address			
	11927 Warfield Street Street			
	San Antonio, TX 78216 City State ZIP Code			
	Relationship to debtor			
13.6.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	Speed Pro		11/24/2020	\$3,653.44
	Address			
	3709 Promontory Point Dr # A-116 Street			
	Austin, TX 78744-1112 City State ZIP Code			
	Relationship to debtor			
Part 7: Previous Locations				
14. Previous addresses				
List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.				
<input checked="" type="checkbox"/> Does not apply				

Debtor

Hayagriva Enterprises, LLC

Name

Case number (if known) _____

Address**Dates of occupancy**

14.1. _____

From _____ To _____

Street

City _____ State _____ ZIP Code _____

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1. _____

Facility name

Street

City _____ State _____ ZIP Code _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.**How are records kept?**

Check all that apply:

 Electronically
 Paper
Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

 No Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?** No. Go to Part 10. Yes. Does the debtor serve as plan administrator? No. Go to Part 10. Yes. Fill in below:**Name of plan****Employer identification number of the plan**

EIN: _____

Has the plan been terminated?

 No Yes

Debtor Hayagriva Enterprises, LLC
Name

Case number (if known) _____

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1 _____ Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	_____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

19.1	Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	Address _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	Address _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

Debtor Hayagriva Enterprises, LLC
Name

Case number (if known) _____

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	_____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____	_____	_____	_____

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?

Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
_____	_____	_____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____	Name _____ Street _____ _____	_____	
	City _____ State _____ ZIP Code _____	_____	

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Debtor	Hayagriva Enterprises, LLC Name			Case number (if known)
Site name and address	Governmental unit name and address		Environmental law, if known	Date of notice
Name	Name			
Street	Street			
City State ZIP Code	City State ZIP Code			
24. Has the debtor notified any governmental unit of any release of hazardous material?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Provide details below.				
Site name and address	Governmental unit name and address		Environmental law, if known	Date of notice
Name	Name			
Street	Street			
City State ZIP Code	City State ZIP Code			
Part 13: Details About the Debtor's Business or Connections to Any Business				
25. Other businesses in which the debtor has or has had an interest				
List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.				
<input checked="" type="checkbox"/> None				
Business name and address	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.	
25.1.	Name		EIN: _____	
	Street		Dates business existed	
			From _____ To _____	
	City State ZIP Code			
26. Books, records, and financial statements				
26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.				
<input type="checkbox"/> None				

Debtor	<u>Hayagriva Enterprises, LLC</u>	Case number (if known) _____
	Name	
Name and address		Dates of service
26a.1.	<u>Melody Bergloff</u> Name <u>2676 Lake Ridge Dr</u> Street	From _____ To _____
	<u>Little Elm, TX 75068-3400</u> City State ZIP Code	
26b.	List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.	
	<input checked="" type="checkbox"/> None	
Name and address		Dates of service
26b.1.	Name Street City	From _____ To _____
26c.	List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.	
	<input checked="" type="checkbox"/> None	
Name and address		If any books of account and records are unavailable, explain why
26c.1.	Name Street City	
26d.	List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.	
	<input checked="" type="checkbox"/> None	
Name and address		
26d.1.	Name Street City	State ZIP Code

Debtor Hayagriva Enterprises, LLC
Name

Case number (if known) _____

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory

Name and address of the person who has possession of inventory records

27.1.

Name _____
Street _____
City _____ State _____ ZIP Code _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Nath, Vikas	416 Wagon Wheel Way Cibolo, TX 78108	, Member	100.00 %

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Debtor	<u>Hayagriva Enterprises, LLC</u> Name			Case number (<i>if known</i>) _____
Name and address of recipient		Amount of money or description and value of property	Dates	Reason for providing the value
30.1. _____ Name _____ Street _____ City _____ State _____ ZIP Code _____				
Relationship to debtor _____				
31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify below.				
Name of the parent corporation _____		Employer Identification number of the parent corporation _____ EIN: _____ - _____ - _____ - _____ - _____		
32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify below.				
Name of the pension fund _____		Employer Identification number of the pension fund _____ EIN: _____ - _____ - _____ - _____ - _____		
Part 14: Signature and Declaration				

Debtor Hayagriva Enterprises, LLC
Name

Case number (*if known*) _____

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/01/2021
MM/ DD/ YYYY

X

/s/ Vikas Nath

Signature of individual signing on behalf of the debtor

Position or relationship to debtor
member

Printed name Vikas Nath

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No
 Yes

Fill in this information to identify the case:

Debtor name Hayagriva Enterprises, LLC

United States Bankruptcy Court for the:
Western District of Texas

Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Bruno Independent Living Aids PO Box 68-5086 Chicago, IL 60695		Unsecured				\$15,772.50
2	Cardmember Services PO Box 6294 Carol Stream, IL 60197	(800) 792-0001	Unsecured				\$47,926.51
3	Handicare 10888 Metro Court Maryland Heights, MO 63043		Unsecured				\$6,465.00
4	Harmar PO Box 744560 Atlanta, GA 30374		Unsecured				\$13,500.00
5	Harmar PO Box 744560 Atlanta, GA 30374		Unsecured				\$5,165.00
6	Harmar PO Box 744560 Atlanta, GA 30374		Unsecured				\$865.00
7							
8							

Debtor

Hayagriva Enterprises, LLC

Case number (if known) _____

Name

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Western District of Texas

In re Hayagriva Enterprises, LLC

Case No. _____

Debtor Chapter _____ 7 _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$4,000.00

Prior to the filing of this statement I have received \$4,000.00

Balance Due \$0.00

2. The source of the compensation paid to me was:

Debtor Other (specify) Vikas Nath

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/01/2021
Date

/s/ Heidi McLeod

Heidi McLeod
Signature of Attorney

Bar Number: 13764700
Heidi McLeod Law Office, PLLC
3355 Cherry Ridge 214
San Antonio, TX 78230
Phone: (210) 853-0092

Heidi McLeod Law Office, PLLC
Name of law firm

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

IN RE: **Hayagriva Enterprises, LLC**

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 06/01/2021

Signature /s/ Vikas Nath
Vikas Nath, member

101 Mobility Franchise
Systems LLC
5221 Oleander Dr
Wilmington NC 284037071

Bruno Independent Living
Aids
8096
PO Box 685086
Chicago IL 60695

Cardmember Services
6138
PO Box 6294
Carol Stream IL 60197

Ford Credit
9354
National Bankruptcy Service Center
Po Box 62180
Colorado Springs CO 809622180

Handicare
0024
10888 Metro Court
Maryland Heights MO 63043

Harmar
9303
PO Box 744560
Atlanta GA 30374

Hayagriva Enterprises LLC
416 Wagon Wheel Way
Cibolo TX 78108

Internal Revenue Services
PO Box 21126
Philadelphia PA 19114

Vikas Nath
416 Wagon Wheel Way
Cibolo TX 78108

US Attorney
Vet AdminFed Housing Admin
601 NW Loop 410 Ste 600
San Antonio TX 78216

US Attorney General
10th Constitution Room 5111
Washington DC 20530

US Trustee
615 E Houston Street Ste 533
San Antonio TX 78205

Universal City Business Park
LLC
41 Westelm Cir
San Antonio TX 782302641